Services Assessment

This assessment has been developed to help identify the supports that people with disabilities need to be successful and to determine the cost associated with providing their services. The assessment includes 3 sections that will be completed at least annually for the person by the support team.

The Services Assessment includes:

- 1. Behavior Support Needs Assessment with the scoring sheet
- 2. Medical Supports Needs Assessment with scoring sheet
- 3. Summary and support tier identification (To be developed)

Each person and their support team should follow the directions as written for each section of the assessment.

Behavior and Medical Supports Needs Assessment

Directions: Utilize the behavior and medical supports definitions to identify specific areas of concern for a specific person. The list is comprehensive and it is highly unlikely that a single individual will display all the problem behaviors or listed. Rank each problem behavior identified none (no support needed), mild, moderate, severe or extreme using the rating scale below. Each identified behavior or medical need will be scored as if a care giver is not present to intervene with the identified behavior or medical need. This assessment will be completed by the person's support team and be based upon known facts and the professional judgment of team members. Whenever possible, professionals who have direct knowledge and experience with the person's problem behavior and medical needs should be involved. Team members should give consideration to factors beyond frequency and duration in considering the rating of a problem behavior or medical need, such as the unpredictability of the behavior or medical need, intentional planning, combinations of behaviors, etc.

Behavior Rating Scale

Mild: Is this behavior mildly burdensome to others, easily ignored or redirected?

Moderate: Does this behavior effect the person's ability to maintain meaningful social

relationships, participate in meaningful activity, or maintain a job?

Severe: Does this behavior pose a risk of harm to the person or to others?

Extreme: Does this behavior require resources outside the persons immediate environment to manage (police involvement, emergency hospitalization, etc.) or increase the risk of significant harm to self or others?

Behavior Definitions

The following is a list of basic behavior topographies that are commonly displayed by people with severe behavioral challenges. Broad categories are presented to facilitate classification and ranking.

Assault: Any attempt to harm others regardless of success. May include hitting, kicking, head butting, scratching, biting, pulling hair, throwing objects, or pinching.

SIB: Any attempt to harm self regardless of success. May include: hitting, picking, biting, head banging, eye gouging, rubbing skin, kneeing, knuckling, forcefully pulling, pulling hair out, pinching, cutting, burning.

Elopement: Any attempt to leave program area, home, activities or predetermined boundaries without permission.

Tantrum: Screaming, yelling, crying, stripping, swearing, throwing self on floor, banging on doors, walls, windows.

Property Damage: Any attempt to break deface or destroy property regardless of success. May include: Hitting, kicking, tearing, cutting, throwing, marking, scratching, burning.

Sexually Inappropriate Behavior: Public masturbation, rubbing genitals on objects, inappropriate touching of self, making sexual remarks or suggestion, voyeurism, inserting objects that may cause harm in body cavities, solicitation.

Sexual Assault: Inappropriate touch, fondling, rubbing against a non-consenting person. Rape, forcing another to engage in sexual behavior, sodomy.

Theft: Any attempt to take items that do not belong to the individual.

Refusing: Refusing reasonable requests related to an individual's health or safety or scheduled tasks.

Smearing: Deliberately handling, throwing, or spreading feces.

PICA: Attempts to ingest or swallow items that are not food or medicine.

Disruptive behavior: Interfering with activities by clinging, pestering, poking, interrupting, yelling, teasing, picking fights, laughing, or crying.

Perseverative behavior: Uncontrollable repetition of a particular response such as word phrase, gesture, routine, or manipulation of objects.

Verbal Aggression: Any verbal or gestural action toward any person with negative intent. Yelling, name calling, threatening.

Inappropriate social interactions: Any inappropriate comments, or gestures.

Toileting: Urinating or defecating anywhere other than the toilet.

Fire setting: Setting fire to property.

Excessive consumption: Excessive eating or food seeking without satiation. Can also include alcohol, drugs, or other illegal substances.

Sleep Disturbances: Difficulty falling asleep or staying asleep during the night.

Maintenance of Mental Health problem or treatment: examples include Psychosis, Panic Attacks or Severe Phobias, Severe Compulsions, Mania, etc.

Medical Needs Rating Scale

Mild: The presence of an illness or disease process which requires minimal time from direct care staff and administrative staff

Moderate: The presence of an illness or disease process which requires daily supports for assessing, observation and assisting with a prescribed routine and is not life threatening **Severe:** The presence of an illness or disease process which requires daily supports for assessing, observation, and assisting with a prescribed routine and may be life threatening.

Extreme: The presence of an illness or disease process which requires supports in excess of routine oral medications, and/or requires support from medical and administrative staff on a daily basis. The absence of supports may likely result in the death of the person.

Medical Needs Definitions

Neurology: Seizures, VNS, balance and movement disorders

Stoma and Ostomy Care: Colostomy, ileostomy, urostomy

Skin: Acne, rashes, dandruff, or other skin issues

Gastrointestinal/Eating/Swallowing: Swallowing problems, GERD, nutrition, ulcers, bowel management, weight, colonoscopy, aspiration pneumonia, special preparation of food or liquid, Thicket use, BMI, weight gain issues

Respiratory/Oxygen/CPAP: Asthma, bronchitis, pneumonia, URI, breathing treatments, nebulizer, vent, deep suctioning, injections.

Cardiovascular: Heart issues, blood pressure, anemia, congenital anomalies

Kidney/Bladder: UTI's, incontinence, Dialysis, catheter

Reproductive Health: Menses, regulation, pap, prostrate, Menses control

Vision Impairment: Glaucoma, Cornea

Ears: Infection, impactions, hearing aids

Endrocrine System: Thyroid disorders, diabetes, gout

Dental/Oral Health: Cavities, crowns, extractions, cleanings

DME: Wheelchairs, diapers, gloves, shower chairs, walkers, splints, CPAP, Hoyer use, two-

person transfer, minimal assist transfer

Cancer: cancer treatment or supporting people with non-treatable cancer

Hospice: As needed and determined by the persons team

Falls: History of injuries due to falling, wear a protective helmet to protect from injuries due to

falling

Wound care: Skin breakdown, decubitis ulcer and what stage

Tube feeding: G-Tube, J-Tube, NG-Tube, medication administered via tube, any oral feeding or

oral stimulation permitted

Hygiene (Including toileting): Toilet conditioned, briefs, needs reminders or assistance to

complete hygiene or total assistance.

Medications: Support by direct care staff to prompt, cue, encourage people to take their

medications including Psychotropic, Anticonvulsant, etc,.